

April 17 th , 2016

To,

Jin-Lei Wang,

Director, Editorial Office

Baishideng Publishing Group Inc

E-mail: j.l.wang@wjgnet.com

Dear Director,

Thank you for accepting it to be published for free in the *World Journal of Gastrointestinal Pharmacology and Therapeutics (WJGPT)*. Please find attached our revised review entitled, "The clinical significance and management of Barrett's esophagus with indefinite for dysplasia" by Prashanthi N Thota, Gaurav Kistangari, Ashwini K. Esnakula, David Hernandez Gonzalo Xiuli Liu (ESPS Manuscript NO: 26593). We thank the reviewers for their valuable input. All the authors have contributed to the conception and design, acquisition of data and drafting of manuscript. The final draft has been approved by all coauthors. The point by point responses to reviewers are attached below.

Thank you for your consideration.

Sincerely,

Prashanthi Thota MD

Correspondence:

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POINT BY POINT RESPONSES TO REVIEWERS

COMMENTS TO AUTHORS

Your review was interesting, but there are two Points to be improved.

1. There are "BE IND" and "BE-IND".Your should use only one abbreviation.

Response: We used BE IND throughout the manuscript.

2. Association of the length and progression is clinical problem which most of clinicians would like to know. So you should write about it in detail

Response: This study was discussed in detail under “ Risk of Incident Neoplasia in BE IND”.

COMMENTS TO AUTHORS

In this review the authors described the histological criteria for BE IND that is challenging with poor diagnostic reproducibility. Because it is difficult to predict the progression to malignancy in BE, the new clinicopathological parameters and biomarkers are also summarized. Basically this is a well-written review of an interesting topic. However some revisions are necessary

1. In a review about the histopathological criteria written by three pathologists it is surprising not to find any microscopic figure!. In the definition of BE IND section at least two figures should be included

Response: As suggested by reviewers, figures were added. We apologize for the oversight.

2. Tables are too detailed and should be simpler and more precise.

Response: Tables are revised.

3. English needs some brushing-up.

Response: The entire manuscript was revised and reworded in some instances to improve the readability. In addition, a paragraph on clinical management and a table with major society guidelines for management of BE IND were included.

COMMENTS TO AUTHORS

1. There are a lot of papers about Barrett’s esophagus. Maybe this paper needs some feature.

Response: As suggested by the reviewers, figures, a table on major society guidelines for management of BE IND and a paragraph on clinical management are added. In addition, tables were simplified and extensive English language editing was done to improve readability.